

Kentucky Transportation Cabinet Division of Right of Way and Utilities

NON-RESIDENTIAL WORKSHEET

COUNTY	ITEM		M NO.	PARCEL NO.		NAME					
DDOODAM			FEDERAL NUMBER			DDO IFOT					
PROGRAM		F	-EDERAL NU	MBEK		PROJECT					
TYF	ERATION			PROPERTY ADDRESS PHONI							
OCCUPANT TYPE			Owner	☐ Tenant	Ow	Owner of Business:					
BUSINESS TYPE			Sole Proprietorship			☐ Partnership	# of PARTNERS:			ation	
CITIZEN (S) of US:			ALIEN (S) LAWFULLY PRESENT IN US:			NON US CIT (S) PRSENT I	in US (CORP only)				
PROPERTY OWNER'S NAME, A			ADDRESS AND PHONE			TERMS OF LEASE FEDERAL TAX ID NUMBER			MBER		
						DATE OF OCCUR	PANCY				
TYPE OF MOVE	□в	Busin	ness	☐ Farm		Nonprofit		Billboard	☐ Miscella	neous	
		Present Lo	Present Location			Replacement Needs					
Zoning											
Licensing Requirements											
Permit Requirements											
Certification Requirements											
Special Utility Req.											
Lot Size											
Entrances (No. & Size)											
Special Loading Areas											
Fencing											
Exterior Lighting											
Parking Spaces											
Environmental Problems											
Building Size – Cost											
Building Description											
ADA Accessible											
No. Restrooms											
Special Needs											
Other											
Number of Employees		Advertising Meth			Methods			Best to mo	ve		
Similar Businesses?						Net Incon					
Personal property owned							ntains premises?				
Frequency of Visits								· · · · · · · · · · · · · · · · · · ·			
OTHER:			. 1								
Relocation Agen				uto.			Undate	ad hy		Date	
Relocation Agent			Date			Updated by Date				Date	